

Complete and send this form, together with applicable fees, to: **Mail Stop ISSUE FEE**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, Virginia 22313-1450**  
 or **Fax (571)-273-2885**

**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance notices and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Place box block 1 for any change of address)

3/30/97 1596 12/18/2000

LESAVICH HIGH-TECH LAW GROUP, P.C.  
 SUITE 325  
 39 S. LASALLE STREET  
 CHICAGO, IL 60603

Note: A certificate of mailing (an only be used for domestic mailings of the Fees). Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmittal.

#### Certificate of Mailing or Transmittal

I hereby certify that this Fees Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mailing Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (771) 273-2885, on the date indicated below.

|                      |
|----------------------|
| (Signature or Stamp) |
| (Signature)          |
| (Date)               |

| APPLICATION NO | FILED DATE | CURR NAMED INVENTOR | ATTORNEY DOCKET NO | LABORATORY NO. |
|----------------|------------|---------------------|--------------------|----------------|
| 159797.85      | 03/18/2004 | Matthew A. Forthman | 00,1247-A          | 3724           |

TITLE OF INVENTION: METHOD AND SYSTEM FOR CREATING VERTICAL SEARCH ENGINES

| APPL. TYPE     | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV PAID ISSUE FEE | TOTAL FEE DUE | DATE DUE   |
|----------------|--------------|---------------|---------------------|---------------------|---------------|------------|
| nonprovisional | YES          | \$755         | \$0                 | \$0                 | \$755         | 03-12-2010 |

| EXAMINER  | ART UNIT | CLASS-SUBCLASS |
|-----------|----------|----------------|
| KDM, PAUL | 2169     | 707-001090     |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.401).

☐ Change of correspondence address for Change of Correspondence Address form PTO-SB-125 attached.

☐ "Fee Address" indication (or "Fee Address" indication form PTO-SB-127, P.O. 02, or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. LESAVICH HIGH-TECH  
 2. LAW GROUP, P.C.;  
 3. STEPHEN LESAVICH

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed in interest as set forth in 37 CFR 1.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNER:

LOGIKA Corporation

(B) RESIDENCE: (CITY AND COUNTRY)

Chicago, Illinois

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee  
☐ Publication Fee (No small entity discount permitted)  
☐ Advance Order - # of Copies \_\_\_\_\_

4b. Payment of Fee(s). (Please first re-pay any previously paid issue fee shown above)

- ☐ A check is enclosed.  
☒ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 32-2281 (include an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(7).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Stephen Lesavich  
 Typed or printed name STEPHEN LESAVICH

Date 28-Dec-09

Registration No. 43,749

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 19 USC 122 and 37 CFR 1.34. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.